

United States Patent and Trademark Office  
- Sales Receipt -

03/01/2006 ASELLMAN 00000004 022448 10500701

01 FC:1801	790.00 DA
02 FC:1252	450.00 DA

United States Patent and Trademark Office  
- Sales Receipt -

03/01/2006 ASELLMAN 00000003 022448 10500701

01 FC:1201	200.00 DA
02 FC:1202	100.00 DA

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Dockets Number

10/500701

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	39 minus 20 =	19
INDEPENDENT CLAIMS	1 minus 3 =	-
MULTIPLE DEPENDENT CLAIM PRESENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

7/27/05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	39	Minus	20 = 19
Independent	1	Minus	3 = -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OTHER THAN SMALL ENTITY

RATE	FEE	OR	RATE	FEE
BASIC FEE		OR	BASIC FEE	920
XS 9=		OR	XS18=	342
X43=		OR	X86=	
+145=		OR	+290=	290
TOTAL		OR	TOTAL	1532

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	100
X43=		OR	X86=	200
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	300

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

02/28/06

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	41	Minus	20 = 21
Independent	4	Minus	3 = 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	
Independent		Minus	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.